

Department of Alcoholic Beverage Control  
**ON-SALE PREMISES INSPECTION SHEET**

State of California  
 GRAY DAVIS, Governor  
 Business, Transportation and Housing Agency  
 MARIA CONTRERAS-SWEET, Secretary

		TYPE OF INSPECTION <input type="checkbox"/> IMPACT <input type="checkbox"/> ROSTF <input type="checkbox"/> Other	
DATE AND TIME OF VISIT		DBA	
LICENSEE		LICENSE POSTED (Section 24046 B&P) <input type="checkbox"/> Yes <input type="checkbox"/> No	
ABC LICENSE NUMBER	PREMISES PHONE NUMBER	CONDITIONS AVAILABLE (Sections 23800 - 23805 B&P) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
PREMISES ADDRESS		MAILING ADDRESS	
PERSON CONTACTED		MANAGER'S NAME	
DAYS/HOURS OF OPERATION		MANAGER HAS BEEN QUALIFIED BY ABC (Rule 57.6 CCR) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	
NUMBER OF EMPLOYEES ON PAYROLL		WEAPONS	

**Compliance Check**

<b>DRUG PARAPHERNALIA</b> (Section 11364.7[b] H&S) <input type="checkbox"/> Violation <input type="checkbox"/> No Violation	<b>RETAIL-TO-RETAIL</b> (Section 23402 B&P) <input type="checkbox"/> Violation <input type="checkbox"/> No Violation
<b>FOOD SERVICE</b> (Section 23038 B&P) (T-41 & 47 Only) <input type="checkbox"/> Violation <input type="checkbox"/> No Violation <input type="checkbox"/> N/A	<b>SLOT MACHINES</b> (Section 330[a] PC) <input type="checkbox"/> Violation <input type="checkbox"/> No Violation
<b>GRAFFITI</b> (Section 25612.5[c][6] B&P) (T-40, 42, 48 & 61 Only) <input type="checkbox"/> Violation <input type="checkbox"/> No Violation <input type="checkbox"/> N/A	<b>LITTER</b> (Section 25612.5[c][5] B&P) (T-40, 42, 48 & 61 Only) <input type="checkbox"/> Violation <input type="checkbox"/> No Violation <input type="checkbox"/> N/A
<b>"NO PERSON UNDER 21 ALLOWED" SIGNS</b> (Rule 107 CCR) (T-42, 48 & 61 Only) <input type="checkbox"/> Violation <input type="checkbox"/> No Violation <input type="checkbox"/> N/A	<b>EXTERIOR LIGHTING</b> (Section 25612.5[c][4] B&P) (T-40, 42, 48 & 61 Only) <input type="checkbox"/> Violation <input type="checkbox"/> No Violation
<b>OPERATING STANDARDS COPY ON PREMISES</b> (Section 25612.5[c][9] B&P) (T-40, 42, 48 & 61 Only) <input type="checkbox"/> Violation <input type="checkbox"/> No Violation <input type="checkbox"/> N/A	<b>"CANCER/PREGNANCY WARNING" SIGNS</b> (Sections 12601[b][1][D][1] and 12601[b][4][E] CCR) <input type="checkbox"/> Posted <input type="checkbox"/> Not Posted
<b>"NO OPEN CONTAINER" SIGNS</b> (Section 25612.5[c][2] B&P) (T-40, 42, 48 & 61 Only) (Violation only if licensee received prior notice from ABC to comply) <input type="checkbox"/> Violation <input type="checkbox"/> No Violation <input type="checkbox"/> N/A	<b>"NO LOITERING" SIGNS</b> (Section 25612.5[c][1] B&P) (T-40, 42, 48 & 61 Only) (Violation only if licensee received prior notice from ABC to comply) <input type="checkbox"/> Violation <input type="checkbox"/> No Violation <input type="checkbox"/> N/A
<b>INDOOR WORKPLACE SMOKING</b> (Section 6404.5 LC)* <input type="checkbox"/> Violation-Employee <input type="checkbox"/> Violation-Patron <input type="checkbox"/> No Violation	

SUBJECTS DISCUSSED WITH LICENSEE OR EMPLOYEE

ABC INVESTIGATOR	OFFICER
OFFICE	AGENCY

THE FOLLOWING INFORMATION WAS PROVIDED:

<input type="checkbox"/> 23038 B&P	<input type="checkbox"/> 25612.5 ____ B&P	<input type="checkbox"/> Rule 143.2, 143.3 &	<input type="checkbox"/> 313.1 PC	<input type="checkbox"/> LEAD Training Schedule
<input type="checkbox"/> 23402 B&P	<input type="checkbox"/> 25752/53/55 &	143.5 CCR	<input type="checkbox"/> 330(a) PC	<input type="checkbox"/> Rule 107 CCR
<input type="checkbox"/> 24046/23804 B&P	25616 B&P	<input type="checkbox"/> 11364.7(b) H&S	<input type="checkbox"/> 12020 PC	<input type="checkbox"/> Other _____

I, \_\_\_\_\_, received the above information.

Signature of Licensee or Agent    **X** \_\_\_\_\_

RECOMMENDATION:

☐ Letter of Warning     
 ☐ 24200(e) Letter     
 ☐ Other Follow-up

\*Send copy to Director's Office for DHS if violation found

ABC-531 (12/01)

White - ABC      Canary - Police/Sheriff's Department      Pink - Licensee

Follow-up Inspection

INSPECTION #1 - REPORT OF FINDINGS:

ADDITIONAL INSPECTIONS NEEDED

☐ Yes ☐ No

OFFICER/INVESTIGATOR

DATE

INSPECTION #2 - REPORT OF FINDINGS:

ADDITIONAL INSPECTIONS NEEDED

☐ Yes ☐ No

OFFICER/INVESTIGATOR

DATE

INSPECTION #3 - REPORT OF FINDINGS:

OFFICER/INVESTIGATORRECOMMENDATION:

OFFICER/INVESTIGATOR

AGENCY

DATE